Effective December 29, 1999												
CLAIMS AS FILED - PART I SMALL ENTITY OTHER THA (Column 1) (Column 2) TYPE C OR SMALL ENTITY												
FOR			NUMBE	R FILED	NUMBER EXTRA		R	ATE	FEE		RATE	FEE
ВА	SIC FEE								345.00	OR	·	690.00
10	TAL CLAIMS		d minus 20⇒ · 2				X	\$ 9=	•	OR	X\$18≈	36
INDEPENDENT CLAIMS 5 minus 3 = 2						×	39=		ОЯ	X78=	156	
MULTIPLE DEPENDENT CLAIM PRESENT								30=		OR	+260=	
* if the difference in column 1 is less than zero, enter *0* in column 2								TAL		OR	TOTAL	392
_	Q مد	LAIMS	S AS A					OTHER				
9-13-04 (Column 1) (Column 2) (Column 3)								IALL	ENTITY	OR	SMALL	ENTITY
NT A		REMA	uiks Nining Ter Dikent		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	R	ATE	ADDI- TIONAL: FEE		RATE	ADDI- TIONAL FEE
AMENDMENT A	Total	• 2	2	Minus	- 22	•	X	9=		OR	X\$18=	0
ME	Independent	• _ `	3	Minus	15	•	×	39=		OR	X78= 8	0
V	FIRST PRESE	NTATIO	N OF M	ULTIPLE DE	PENDENT CLAIM		.1	30=	/	OR	3/2	0
								O/AL	/	OR	TOTAL	7
	aliAlos	/Cob	<i>ı</i> mn 1)		ADDI	T. FEE	V	,	ADOIT, FEE			
AMENOMENT 8		CL REM AF	AMAS AINING TEA IDMENT	*	(Column 2) HighEst NUMBER PREVIOUSLY PAID FOR	(Column 3) PRESENT EXTRA	R/	ATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
200	Total	. /	2/	Minus	22	-	X	9=		OR	X\$18=	
	Independent	• 6	3	Minus	3		×	39=		OR	Х78,=	
È	FIRST PRESE	NTATIC	N OF M	ULTIPLE DE	PENDENT CLAIM		+1	30=		OR	+260=	
	1.1.							TOTAL T. FEE		OR	TOTAL	
2(16) D (Column 1) (Column 2) (Column 3)										-		
ENTC		REM	AIMS AIMING TER IOMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	R/	ATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	<del></del>	4	Minus	2	=	X	9= -		OA	X\$18=	
AMENDA	Independent	•	3	Minus	7.5	-	X	39=		OR	X78=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									1			
尸								2A_ :	<b>1</b> 1	~~		\
<b> </b>	t the entry in only	ma 1 ie i	ose than t	he entry in col	pmn 2, write "T in co	kenn 3.	با	30=	<b>.</b> \	OR	+260=	,
:	# the entry in colu # the "Highest Nu	ember Pri	rriously P	eld For IN TX	umn 2, write "O" in co IS SPACE is less tha IS SPACE is less tha Ir Independent) is the	n 20, enter "20." in 3, enter "3."	. ADDI	T. FEE		OR	TOTAL ADDIT, FEE	

FORM PTO-675

Palart and Trademark Office, U.S. DEPARTMENT OF COMMERCE

Application or Docket Number

VLS, GPO: 3000-413-4393904